## 2008 Total Compensation Adjustment Unit 5, 7 & 8 - Combination Inspector 2.5% Total Compensation Increase 2.25% **Salary Change Effective 12/16/07** 7/1/2007 12/16/2007 Changes @ **Total Compensation Element** Comb. Inspector\* 2.5% Comb. Inspector\* Salary - Range A37 Step 5\* \$ 8,045 181 8,226 \$ \$ **Mandatory Allocations** PERS Employee Shared PERS 07/07 - 07/08 8.835% \$ 710.80 \$ 15.97 \$ 726.77 Employee Shared PERS 12/06 - 6/07 9.164% Social Security 2008@6.20% of \$102,000 6.20% 498.81 11.21 510.02 \$ \$ \$ 2007@6.20% of \$ 97,500 Medicare 1.45% @1.45% of Salary \$ 116.66 2.62 119.28 Holiday Pay 15 Days per Year \$ 462.58 \$ 10.39 \$ 472.97 Vacation Pay 15 Days per Year 462.58 \$ 10.39 \$ 472.97 \$ Medical Insurance (PERS Min.) 80.80 16.20 97.00 Medical Insurance (City Min.) \$ 351.66 \$ 23.37 \$ 375.03 \$ PERS. Medical Insurance Fund \$ 2.00 \$ 2.00 **Discretionary Allocations** Life Insurance (\$15,000 Coverage) 5.85 \$ 5.85 Medical & Dental Insurance \$ 55.74 \$ \$ 55.74 Medical Insurance # Dental Insurance \*\* 0.0102 \$ Long Term Disability 43.41 43.41 \$ -\$ (Capped at \$43.41) Total Compensation (For Salary Adj. Purposes) 10,836.21 270.91 11,107.12 City Paid PERS 726.77 710.80 15.97 Retiree Medical 170.22 159.91 10.31 Total Compensation (For Benchmark Adjustment Purpose \$ 11,706.92 | \$ 297.19 12,004.11 \* Three party Delta Dental Preferred Option (with maximum \$2000 for PPO; \$1500 for non-PPO, subject to contract amendment). # Medical Insurance includes Administrative Fee of 0.29% and excludes \$97.00 non-discretionary allocation.